## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (703)

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO  10/613,812 07/05/2003 Daniel Smith 683.5  TITLE OF INVENTION: MARINE WEEDWAKER  02/11/2005 BRBRAHR2 00000097 10613812  01 FC:2501 700.  APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(s) DUE DATE DUI  nonprovisional YES 500 700 50 700 02/22/200  EXAMINER ART UNIT CLASS-SUBCLASS  TORRES, ALICIA M 3671 056-008800  1. Change of correspondence address or indication of "Fee Address" indication for "Fee Address" indic	enance fee notifications.	ADDRESS (Note: Use Block 1 for a					and/or (b) indicating a sep		
Matthew J. Peirce, Esq. Suite#1005 330 S. 3rd Street Las Vegas, NV 89101  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO 10/613,812 07/05/2003 Daniel Smith 1	7500	11/19/2004			Fee(s) Tran papers. Eachave its ow	nsmittal. The	is certificate cannot be used al paper, such as an assignment of mailing or transmission	for any other accompanying ent or formal drawing, mus	
Suite#1005 330 S. 3rd Street Las Vegas, NV 89101  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO 10/613,812 07/05/2003 Daniel Smith 68.35 TITLE OF INVENTION: MARINE WEEDWAKER 02/11/2005 BABRAHA2 00000097 10613812  APPLINTYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES 0.00 02/22/2000  EXAMINER ART UNIT CLASS-SUBCLASS TORRES, ALICIAM 3671 056-008000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1,53). 056-008000 1. Change of correspondence address (or Change of Correspondence Address from PTO/SB1/22) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation for Fee (s) are enclosed.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PLEASE NOTE: Status indicated above)    Date of the patent of the fee(s) are enclosed.   Date of the patent of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of the patent of the fee(s) are required fee(s), or credit any overpace of th			NPE		11010110011		_	•	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/613,812 07/05/2003 Daniel Smith 6835  TITLE OF INVENTION: MARINE WEEDWAKER 02/11/2005 BABRAHA2 00000097 10613612 01 FC:2501 700,1  APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES 00/7 0/9 50 700 02/22/200  EXAMINER ART UNIT CLASS-SUBCL'ASS TORRES, ALICIA M 3671 056-008000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence PUDS/12/23) tatched. (2) the name of a up to 2 registered patent attorneys or agents OR, alternatively, (3) the name of a up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of a up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (3) the name of up to 3 registered patent attorneys or agents OR, alternatively, (4) the name of up to 3 registered patent attorneys or agents OR, alternatively, (4) the name of up to 3 registered patent attorneys or agents OR, alternatively, (4) the name of up to 3 registered patent attorneys or agents OR, alternatively, (4) the name of up to 3 registered patent attorneys or agents OR, alternatively, (4) the name of up to 3 registered patent attorneys or agents	uite#1005	. /			I hereby ce States Posta addressed	ertify that that al Service value to the Mai	nis Fee(s) Transmittal is being with sufficient postage for file of the sufficient state of the state of the sufficient postage for file of the sufficient state of the sufficient sufficie	ing deposited with the United rst class mail in an envelope s above, or being facsimile	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/613,812 07/05/2003 Daniel Smith 6835 TITLE OF INVENTION: MARINE WEEDWAKER 02/11/2005 BABRAHA2 00000097 10/613812 01 FC:2501 700.  APPLIN. TYPE SMALL.ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES 02/22/200  EXAMINER ARI UNIT CLASS-SUBCLASS TORRES, ALICIA M 3671 056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56) correspondence address or indication of "Fee Address" (37 CFR 1.56) and the name of a single firm (having as a member a registered attorney or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents. If no name is 1 Sissed, no name will be primited.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assigned data will appear on the patent. If an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity G-4a. The following fee(s) are enclosed:  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) or credit any overpal data. The following fee(s) are enclosed: Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclosed.  Acheck in the amount of the fee(s) is enclosed.  Ab. Payment of Fee(s): Acheck in the amount of the fee(s) is enclo		1	ECQ 1 0 2005	igh.	transmitted	to the USP	TO (703) 746-4000, on the	date indicated below.	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO  10/613,812 07/05/2003 Daniel Smith 6835  TITLE OF INVENTION: MARINE WEEDWAKER 02/11/2005 BABRAHA2 00000097 10613812 01 FC:2501 700.  APPLN:TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI  nonprovisional YES 5047 709 \$0 50 700 02/22/200  EXAMINER ART UNIT CLASS-SUBCLASS  TORRES, ALICIA M 3671 056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).	_	虽	ر. ار.	į.	10/1	Matt	hew J. Per	(Depositor's name)	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO  10/613,812 07/05/2003 Daniel Smith 6835  TITLE OF INVENTION: MARINE WEEDWAKER 02/11/2005 BABRAHA2 00000097 10613812 01 FC:2501 700.  APPLN:TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI  nonprovisional YES 5047 709 \$0 50 700 02/22/200  EXAMINER ART UNIT CLASS-SUBCLASS  TORRES, ALICIA M 3671 056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).		K	the one		in	7/K	Pe	(Signature)	
Daniel Smith 02/11/2005 BABRAHA2 00000097 10613812 01 FC:2501 700.  APPLN.TYPE SMALL ENTITY ISSUE FE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES 50 700 02/22/200  EXAMINER ART UNIT CLASS-SUBCLASS  TORRES, ALICIA M 3671 056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached.  "Toree Address" indication (or "Fee Address" Indication form PTO/SB/122) attached.  "Toree Address" indication form PTO/SB/122 att			TRADE		<u>a</u>	185	105	(Date)	
APPLN. TYPE SMALL ENTITY ISSUE FE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES SMALL ENTITY CLASS-SUBCLASS  EXAMINER ART UNIT CLASS-SUBCLASS  TORRES, ALICIA M 3671 056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication from PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication from PTO/SB/122) attached.  "Toke Address indication from PTO/SB/122) attached.  "Toke Address indication from PTO/SB/122 attached.  "Toke Address in the patent in the patent in from pto a single firm (having as a member a registered pa	PPLICATION NO.	FILING DATE	FIRS	T NAMED INVE	D INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES	10/613,812	07/05/2003		Daniel Smith 6835					
APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES	E OF INVENTION: MAI	RINE WEEDWAKER				02/	11/2005 BABRAHA2 0000	0097 10613812	
APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUI nonprovisional YES			} o:			FC:2501 700 00			
EXAMINER  ART UNIT  CLASS-SUBCLASS  TORRES, ALICIA M  3671  056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  The Address from PTO/SB/122 attached.  The Address from PTO/SB/123 attached.  The Address from PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpal Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overp						,		700.00 UP	
EXAMINER  ART UNIT  CLASS-SUBCLASS  TORRES, ALICIA M  3671  056-008000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address' indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):  [A] Individual  [C] The names of up to 3 registered patent attormeys or agents. If no name is 1 listed to 1 listed at 3 listed patent attorneys or agents. If no name is 1 listed patent attorn	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	P	UBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE	
TORRES, ALICIA M  3671  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  The Address form PTO/SB/122 attached.  The Address form PTO/SB/12 attached.  The Following fee(s) are enclosed:  The	nonprovisional	YES	\$634 7	<i>v</i> 0	\$0	1	\$ 700	02/22/2005	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  The Address of indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  The Director is hereby authorized by charge the required fee(s), or credit any overpapens of the patent stronger of this form).  5. Change in Entity Status (from status indicated above)  A check in the amount of one produced fee(s), or credit any overpapens of the patent stronger of the form).  B Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	EXAMINER		ART UNIT	C	LASS-SUBCI	ASS	]		
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):  Advance Order - # of Copies  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  Deposit Account Number  (1) the names of up to 3 registered patent attorneys or agents. If no name is registered attorney or agents. If no name is no name will be printed.  2	TORRES, ALICIA M		3671		056-008000		•		
Change of correspondence address for Change of Correspondence Address from PTO/SB/122) attached.  Tee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):  At the following fee(s) are enclosed:  A check in the amount of the fee(s) is enclosed.  Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Advance Order - # of Copies  Pyment by credit card. Form PTO-2038 is attached.  Advance Order - # of Copies  Advance Orde		ddress or indication of "Fe	e Address" (37 2.	For printing on	the patent fr	ont page, li	st 10 (	11 TD	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)   PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go  4a. The following fee(s) are enclosed:  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpa Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g)(2).	,	ice address (or Change of C	Correspondence (1			stered pater	nt attorneys 1//(a·t	thew J. Tein	
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go  4a. The following fee(s) are enclosed:  A check in the amount of the fee(s) is enclosed.  Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Corporation or other private group entity Corporation entity Corporation entity Corporation entity Corporation entity Corporation entity Cor			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 2						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has beer recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go  4a. The following fee(s) are enclosed:  Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpance peposit Account Number (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  a Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	O/SB/47; Rev 03-02 or r	of a Customer 1 2							
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go  4a. The following fee(s) are enclosed:  Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpance peposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	SIGNEE NAME AND R	ESIDENCE DATA TO BE	PRINTED ON THE	PATENT (print	or type)			·	
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Go  4a. The following fee(s) are enclosed:  Solution Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Deposit Account Number Deposit Account Number  The Director is hereby authorized by charge the required fee(s), or credit any overpance (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	EASE NOTE: Unless an ordation as set forth in 37	n assignee is identified bel 7 CFR 3.11. Completion o	low, no assignee data of this form is NOT a su	will appear on a bstitute for filing	the patent. I g an assignn	If an assign nent.	nee is identified below, the	document has been filed for	
4a. The following fee(s) are enclosed:    Sales   Fee   Sales   Sales	NAME OF ASSIGNEE	į	(B) RE	SIDENCE: (CIT	Y and STA	TE OR CO	UNTRY)		
4a. The following fee(s) are enclosed:    Sale   Issue   Fee					. i				
4a. The following fee(s) are enclosed:    Sales   Fee   Sales   Sales	check the appropriate as	ssignee category or categor	ies (will not be printed	on the natent):	Individ	dual D.C.	ornoration or other private or	roun antity   Government	
Issue Fee Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpa Deposit Account Number (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			4b. Pay	ment of Fee(s):					
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			<b>`</b>	A check in the a	nount of the	fee(s) is en	iclosed. Qhec	hs totul)	
Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	Advance Order - # of Ce	opies	Den	The Director is	hereby authoriber	orized by c	harge the required fee(s), or	credit any overpayment, to	
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	ange in Entity Status (fr	rom status indicated above)				<del></del> -	(cherose an extra (	copy or uns rormy.	
THE DAY OF THE PARTY OF THE PAR			_	o. Applicant is n	o longer clair	ming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified about NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the United States Patent and Trademark Office.	irector of the USPTO is r The Issue Fee and Publ at as shown by the record	requested to apply the Issue lication Fee (if required) will s of the United States Pater	Fee and Publication F ill not be accepted from the and Trademark Office	ee (if any) or to n anyone other to ee.	re-apply an han the appli	y previousl icant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature Many Date 2/05/05	thorized Signature	Marko	20 -		r	Date 2	105/05	<del> </del>	
Typed or printed name Mathew J. Feine Registration No. 41, 245	· (D-	Matthew I	Peine	<del></del>			No. 41, 245		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, prepared.		is required by 37 CFR 1 31	1. The information is	required to obtain				nd by the USPTO to process	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.